

horrible scourges of the times. Finally, physicians and people came to realise its contagiousness; detention hospitals sprang up throughout Europe, in which were cared for practically all cases of the disease. The movement was so widespread and so effectively carried out that at one time it is estimated there were no less than 16,000 such hospitals in the civilised parts of Europe, with the result that the disease was mastered, and leprosy as one of the great enemies of mankind annihilated.

Then 100 years ago there was the scourge of small-pox, killing and disfiguring its victims on every hand, the great dread of rich and poor alike. Edward Jenner saw the value of vaccination and vehemently advocated its usefulness. Again physicians and people listened to the story, followed his example, and, after a time, small-pox practically ceased to be.

Now, for many years, tuberculosis has been the greatest of devastating scourges, with little or no knowledge existing of prevention or cure. Back in the time of the Renaissance, physicians, especially of Italy, believed in its pronounced contagiousness or communicability; indeed, so firmly convinced of this were the anatomists of the time, that they would never dissect bodies of those dying of consumption. Gradually, however, the idea of its possible transmission from one individual to another passed away, only to be revived toward the end of the last century by Villemin, who, in 1867, definitely showed it could be inoculated from one rabbit to another. In 1882 Robert Koch discovered the specific germ of the disease and since then the knowledge of its transmission, its communicability, and its prevention has spread to all countries. Yet this knowledge is still but most imperfectly understood by the mass of the people. It is necessary to spread this knowledge, to make it universal, in order that hope may come that consumption, like leprosy and smallpox, may be stamped out of civilised countries.

Tuberculosis, unfortunately, finds in our cities by far its greatest number of victims among the poor and lowly, largely from their necessary manner of life, their occupations, their habitations, their ignorances. Here it persists, following houses and families, perhaps for years, until nearly every member has fallen a prey. No one is so likely as a visiting nurse, who goes about as a real sister of mercy, to gain admittance to the hearts and homes of these poor people, and to her kind we must look to carry the torch of knowledge into the darkness of these unfortunate homes.

In order to work to the greatest advantage, the nurse should be associated with a well-organised outdoor clinic, devoted almost exclusively to tuberculosis cases. Here she should be in attendance during the hours of the clinic. Here the patients should see her and come to know her, and so when she seeks them out, they may receive her gladly, and willingly attempt to follow

her instructions. In her visits she learns about other members of the family and their friends; and, therefore, may be able to bring to the clinic for definite diagnosis those at an early stage of the disease, who as yet may not even suspect they are infected. There can be no more efficient results of the nurse's work than in leading to an early diagnosis those in whom trouble is impending, and so placing the individual in a hopeful position for speedy recovery. And directly in this line, too, she can do much in persuading patients from wasting money and much valuable time upon quack medicines and patent cures for consumption, until such time when the hope of recovery under proper methods is gone and they have become sure victims of the disease and dependent upon charity for support. No single feature is a greater enemy to the hope of the consumptive and the complete eradication of the disease than the advertisements in newspapers of "sure consumptive cures." The authors of them should be made criminal and arraigned on charges no less severe than manslaughter, and the newspapers which publish them should be held aiders and abettors to the criminal act.

The nurses, too, will instil into the minds of the sick ones such precautions as are necessary to avoid transmitting the disease to other members of the household, and she will thus endeavour to encourage the patient to be most careful of his sputum—to burn it when possible, to use paper napkins or spit cups; and if her work be allied to some society provided with means, she may be able to constantly supply the most needy with these methods of prevention. She may, too, encourage the patient to seek open-air life, to sit upon the porch, in the back yard, even upon the fire escape, to sleep with windows open, &c., &c. She may hear of those unable to provide suitable and sufficient food, and through the dispensary, the diet kitchen, or other charitable organisation, may procure this additional complement to the patient's welfare.

She may find opportunities for mitigating, to a rational degree, the fears of friends and family of the disease, so that by exercising proper precautions they can safely be near to care for and cheer those they love.

Lastly, by her kindly presence and soothing care she may soften the pains and sorrows of the final hours of the poor suffering mortal; and when he has gone she may be instrumental in seeing that such fumigation and disinfection is employed that the house or room shall not become a menace to its next occupant.

These are some of the ways in which the visiting nurse can be useful in the war against the "Great White Plague."

The experiences of Miss Thelin, the nurse in the employ of the tuberculosis dispensary of the Johns Hopkins Hospital, substantiates these assertions—

[previous page](#)

[next page](#)